Unicorn Application Form Retail (A) Shares



Please complete this form with a ball point pen using BLOCK CAPITALS

Surname

Your Details

Post code

Email address

The form should be returned to **Unicorn Asset Management Limited, Hamilton Centre, Rodney Way, Chelmsford, Essex, CM1 3BY**The form should be read in conjunction with the relevant Key Investor Information Document and Supplementary Information Document If you have any questions while completing this form, please call 0345 026 4287 between 08:30 and 16:30 on any business day.

Forenames in full									
Account Designation (optional)									
Permanent Address									
Post code							Telephone		
Email address							 Date of Birth		
Existing Account Numb	er (if ap	oplicabl	e)						
National Insurance Number							If you do not have a National In please tick this box	surance number	
Lates Halden Date:	1- /:£ -		\L -\						
Joint Holder Detai	ls (if a	pplica	able)						
Joint Holder Detai	ils (if a		able) urname	e	I				
	ils (if a			e					

Telephone

Date of Birth

Investment

Please instruct how you would like your investment to be allocated

UK Growth
Mastertrust
Outstanding British Companies
UK Income – Income shares
UK Income – Accumulation shares
UK Smaller Companies
UK Ethical – Income shares
UK Ethical – Accumulation shares
Total

Initial Investment
£
£
£
£
£
£
£
£
£

Monthly
Contribution
£
£
£
£
£
£
£
£
£

Reinvest Income Yes/No	
Yes *	
Yes *	
Yes *	

Lump sums must be for a minimum of £2,500 (minimum of £1,000 per fund).

To settle your purchase please make your payment by bank transfer to

Bank Name: Barclays Bank

Account Name: Unicorn Dealing Account

Account Number: 03236862
Sort Code: 20-00-00
Reference: Your Name

A contract note will be sent to you following placement of your deal

For regular savings please complete the Direct Debit form overleaf. If you have not completed the 'Reinvest my income' box above, any income will be automatically reinvested.

*Income from Accumulation Shares is automatically reinvested.

Bank Mandate	
Please supply bank details into which we	will pay any income or redemption proceeds.
Name of bank / building society	
Address	
Post Code	
Account Name	
Account Number	
Sort Code	
Building society reference number	
Financial Advisor Details To be completed by an introducing agent	
To be completed by an introducing agent	
Name of Agent	
Agent reference	FCA Number
Contact Name	Contact Telephone No:
	Contact Email:
, -	ven advice on the enclosed investment (s), please note we must be advised at the point of not been given. Please confirm if no advice has been given, please leave blank if you have
Authorised Signature:	

Identity Verification

Together with Anti Money Laundering Documentation, for Corporate investors an up-to-date authorised signature list, Memorandum and Articles of Association or a Certificate of Incorporation (all documents must be the originals or certified true copies). We have certain responsibilities to verify the identity and permanent address of our clients under UK anti money laundering legislation. If you are resident in the UK we will undertake an electronic anti money laundering check of the personal data you have provided. The check will be undertaken by a reputable referencing agency, which will retain a record of that check. This information may be used by the ACD, Registrar and depository for fraud prevention purposes. Details of the service we use are available upon request. Where an electronic check of personal data is not appropriate or acceptable we will ask you to provide documents to establish the correctness of your personal details. These will generally be a certified copy of your passport or photo-card driving licence together with a copy of a recent bank statement or utility bill dated within the last three months, but other documents may be required by us depending on the circumstances. We reserve the right not to make payments to third parties unless this is in relation to a deceased account, and will not allow payments from any other party.

Declaration

I declare that

- I am the beneficial owner of this investment
- I have read, understood and retained the Key Investor Information Document (KIID) in respect of each share class in which I wish to invest, in conjunction with the Supplementary Information Document (SID)
- I accept the terms and conditions
- I am not a national, Citizen or resident of the United States of America.
- I am not a corporation or partnership organized under the laws of the United States of America or having a principal place of business in the United States of America
- I am not applying for shares in order to offer, sell or transfer such shares to a U.S person, as defined in the prospectus, either directly or indirectly.

This application form has been completed to the best of my knowledge but should circumstances change, I will inform you immediately.

Signatures	Date		
	DD	MM	YY
	DD	MM	YY





Instruction to your bank or building society to pay by Direct Debit

Please fill in the whole form using a ball point pen and send it to

Service user number

Unicorn Asset Management Limited	8	8	0	1	0	3	
Hamilton Centre							
Rodney Way							
Chelmsford							
Essex							
CM1 3BY							
Name(s) of account holder(s)	Instruc	tion to yo	ur bank	or buildir	g society		
	the accassure	count de d by the ction ma	etailed in Direct I ny remai	n this In: Debit Gu n with U	struction uarantee Unicorn A	n subject e. I under Asset Ma	I Direct Debits from to the safeguards rstand that this anagement Limited o my bank/building
Bank/building society account number	society		iiis wiii L	ie passei	u electi c	Jilically to	o my bank/bullumg
Branch sort code							
Name and full postal address of your bank or building society							
To: The Manager Bank/building society							
Address	Signature	s)					
Postcode	Date						
Reference (to be completed by Unicorn)							
Panks and huilding societies may not accent Direct	D-1:41		forcome	. t			

Banks and building societies may not accept Direct Debit Instructions for some types of account



Direct Debit Guarantee -This guarantee should be detached and retained by the payer.

- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit Unicorn Asset Management Limited will notify you ten working days in advance of your account being debited or as otherwise agreed. If you request Unicorn Asset Management Limited to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit, by Unicorn Asset Management Limited or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society
 - If you receive a refund you are not entitled to, you must pay it back when Unicorn Asset Management Limited asks you to
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.